To lead in providing quality comprehensive healthcare that is affordable and accessible, and to support the dedicated professionals who make caring for the individuals we serve their number one priority.

To be recognized as a leader in comprehensive healthcare, challenging and inspiring individuals, families, and employees to reach their full potential and purpose.
Community Treatment, Inc. (COMTREA) had its humble beginning in 1973 as a response to the community desire to provide an alternative to incarceration for individuals with mental illness and drug/alcohol use. The absence of services for addiction recovery and counseling in Jefferson County led to the development of a not-for-profit agency that would build a halfway house which was the most immediate need at that time. That agency, created on January 22, 1973, would later take the legal name of Community Treatment Incorporated, which was shortened to COMTREA, the first syllable of each word. COMTREA has continued to evolve and grow as an agency focused on responding to the needs of the community particularly those social needs that can thwart the full realization of an individual's potential for a productive and fulfilling life. This response to social needs saw the expansion of COMTREA from just a community mental health center to include a Federally Qualified Health Center in 2012, which would allow us to provide the full array of high quality, comprehensive medical, dental, behavioral health, patient advocacy and other social services to people who need them most, regardless of their ability to pay.

This commitment means that we strive to do our part in improving clinical outcomes in and around our communities. Since our founding in 1973, we are proud to have extended our reach serving around 24,000 patients annually in Jefferson County and the Saint Louis Metro region. Today the health care marketplace is even more complex; insurance for patients has changed significantly and will change again, therefore we must remain vigilant. After a decade of steady growth, COMTREA Comprehensive Health Center is positioned for extraordinary opportunities to better serve our community. Our objective now is to implement strategies that support business sustainability, eliminate barriers to care and ensure we uphold our patient-centered philosophy that drives excellence in primary care, dental care and behavioral health for our existing patients and the new ones to come. With local and state support, our dedicated team added and expanded a variety of programs and services in response to patient's needs, including pediatrics, open access for substance use treatment and mental illness, and new approaches to chronic care management. COMTREA's mission is the driving force behind the work we do. Our compassionate staff of more than 360 work diligently to provide personalized, patient-centered care to each patient who walks through our doors. We thank you, all of our staff, Directors, and partners who made this possible. We look forward to continuous success as we embrace the challenges ahead and the coming opportunities. We welcome you to COMTREA Comprehensive Health Center as a visitor, a patient, an applicant or any interested providers. We are confident that your experience with us will be a positive one.

Respectfully,

Susan Curfman, MA
CHIEF EXECUTIVE OFFICER

Jerry Rogers
BOARD PRESIDENT
WHO WE ARE
COMTREA Comprehensive Health Center is a leading advocate and health care provider for individuals and families with limited access to quality care in Jefferson County, MO. Quality health care is often defined as providing the health care needs of the patient when they need it and in the right way. Our nearly 400 dedicated health care providers, clinical support staff, and administrative professionals are committed to providing quality patient-centered medical, dental and behavioral health care in the communities we serve.

WHAT WE DO
COMTREA Comprehensive Health Center is dedicated to providing exceptional health care services across the 10 service locations while maintaining fiscal accountability and responsibility. We provide care for 24,000 patients who live in Jefferson County and the St. Louis Metro area.

<table>
<thead>
<tr>
<th>ASSETS</th>
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<tbody>
<tr>
<td>CURRENT ASSETS</td>
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<td>OTHER ASSETS</td>
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<td>TOTAL ASSETS</td>
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<tr>
<th>LIABILITIES</th>
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<tr>
<td>CURRENT LIABILITIES</td>
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<th>NET ASSETS</th>
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<tr>
<td>UNRESTRICTED</td>
</tr>
<tr>
<td>RESTRICTED</td>
</tr>
<tr>
<td>TOTAL NET ASSETS</td>
</tr>
</tbody>
</table>

TOTAL LIABILITIES AND NET ASSETS $ 19,177,636
**OPERATING SUPPORT AND REVENUE**

By Source:
- Fee for Service: $23,970,755 (60.70%)
- Free Care (Sliding Fee): $1,649,033 (4.00%)
- Contractual Adjustments: $6,234,639 (16.70%)
- Adjusted Fee for Service Amount: $16,087,083
- Grants/Contracts: $3,569,186 (13.50%)
- MIL Tax & Sales Tax: $5,555,026 (20.90%)
- Donations/Fundraising: $245,608 (0.90%)
- Misc: $1,064,871 (4.00%)

Total Support and Revenue: $26,521,774

**OPERATING EXPENSES**

By Program:
- Medical: $2,982,709 (11.50%)
- Dental: $5,277,332 (20.30%)
- Behavioral Health: $15,047,776 (57.90%)
- A Safe Place: $689,471 (2.70%)
- Children's Advocacy Center: $601,970 (2.30%)
- Tales with Tails: $55,322 (0.20%)
- Administration: $1,321,543 (5.10%)

Total Expense by Program: $25,976,123

By Source:
- Personnel Expense: $19,568,749 (75.30%)
- Supplies/Equipment: $1,004,381 (3.90%)
- Facilities (Rent, Utilities & Repair): $1,305,704 (4.00%)
- Depreciation: $1,339,225 (5.20%)
- Fundraising: $76,004 (0.30%)
- Insurance & Contracted Services: $1,044,020 (4.00%)
- Advertising/Recruiting: $160,813 (0.60%)
- Other: $1,477,227 (5.70%)

Total Expense by Source: $25,976,123
Lives Touched

FY 2017
BY THE NUMBERS

13,857
TOTAL
SERVED

6,247 males
7,609 females

CLIENTS BY AGE

85 and Older
75 to 84 Years
65 to 74 Years
55 to 64 Years
35 to 54 Years
20 to 34 Years
15 to 19 Years
10 to 14 Years
6 to 9 Years
3 to 5 Years
0 to 2 Years

29
114
402
1490
3861
3085
1189
1323
1059
781
524

75% of our patients were at or below 200% of the Federal Poverty Level (FPL).

2016 Federal poverty guidelines at 200% FPL is:

- $23,760 for a single person
- $48,600 for a family of four

UNIQUE PATIENTS
by division

34% BEHAVIORAL HEALTH
25% PRIMARY CARE
41% ORAL HEALTH

COMTREA IS A FEDERALLY QUALIFIED HEALTH CENTER
The Future is Now

STRATEGIC PLAN

The strategic plan for fiscal year 2017 was set up by program and/or division with a total of 246 action steps. Excellent progress was made in the implementation of the strategic plan with 91% of all action steps completed and deletion of 9% of the action steps following changes in priorities by the Board or program closure such as the equine therapy program at Bridle Ridge.

This Annual Report highlights the many outcomes and positive impact on the community and individuals served. Some of the specific achievements are summarized below.

- Integration has been a central theme with implementation of these workflows/practices including centralized scheduling, cancellation & no show, controlled narcotics patient agreement and monitoring, and critical incident.
- Implementation of Open Access for Primary Care in Oct. 2016 and expanded open access for dental to five days per week.
- We continue on our quest to become a trauma informed agency and at the close of fiscal year 2017, two-thirds of our staff and the Board have received trauma informed training.
- Collaboration with Jefferson County Health Department, Mercy Hospital Jefferson, Jefferson County Drug Prevention Coalition and other community partners to bring about a prescription drug monitoring program in Jefferson County.
- Launch of the Tails with Tales canine program with integration in school services around the “No More Bullying” and drug prevention training and education.

Strategic Vision

To be recognized as a leader in comprehensive healthcare, challenging and inspiring individuals, families, and employees to reach their full potential and purpose.

This strategic vision is manifested in the following core values.

C: Compassion and Community Centered Care
O: Outreach and Opportunity
M: Meaningful and Measured Services
T: Trauma Informed and positivity focused
R: Responsive, Respectful and Resilient
E: Excellence and Evidence Based Services
A: Affordable and Accessible
How do we do it

OUR EMPLOYEES

**24 PROVIDERS**
Physicians, Psychiatrists, Nurse Practitioners, Dentists

**86 CLINICAL STAFF**
Includes RNS, LPNS, Hygienists, LCSWS, LPCS, Case Managers, School Liaisons

**100 CLINICAL SUPPORT**
Includes Medical Assistants, Behavioral Health Medical Assistants, Dental Assistants, Resident Assistants, Community Support Specialists, Victim Advocate, Family Advocate, Technicians, Forensic Interviewers

**140 ADMINISTRATION AND OPERATIONS STAFF**
All Others

The late Steve Jobs put it very succinctly:

> Great things in business are never done by one person. They’re done by a team of people.

COMTREA embraces teamwork and we are proud of those who serve to accomplish our mission each year. We have accomplished much this year and our dedicated and talented employees and volunteers are the reason why.

**EMPLOYEE RECOGNITION**
Each year, COMTREA hosts a themed luncheon to honor employees who have reached a milestone in their service to our organization. This past year, 32 employees were recognized for achieving their 5, 10, 15, 25 and 30 year anniversaries with COMTREA.

**5 YEARS**
Gabriele Ayres
Jeffery Best
Adrienne Birgé
Tiffany Burke
Susan Dawson
Doug Fesler
Kim Harris
Rebecca Hassler
Katy Herman
Nick Lane
Amy Phillips
Shana Richter
Ben Roig
Rebecca Rudolph
Terri Shevlin
Norinee Thomas
Bryttany Whipple

**10 YEARS**
Kathy Carr
Sylvia Chamberlain
Carol Cross
Nancy Erxleben
Shirley Harris
Wendy Harris
Elizabeth Haselhorst
Leigh Kokenis
Amy Rhodes
Carrie Burkey (Wickerham)

**15 YEARS**
Amanda Rumble

**25 YEARS**
Mickie Runyon

**30 YEARS**
Glenna Bailey
Margo Pigg
Tracy Wiecking

109 Volunteers in our community (including board members) donated 4,093 hours to COMTREA’S mission
<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1973</td>
<td>The Corporation was created and Executive Director, Stephen F. Huss hired. The agency’s goal was “to reduce recidivism”.</td>
</tr>
<tr>
<td>1976</td>
<td>A disastrous fire gutted the “halfway house” building. The Board decided to become a mental health center for the county.</td>
</tr>
<tr>
<td>1978</td>
<td>COMTREA was one of the first programs in Missouri to be certified by the MO Dept of Mental Health as the Community Mental Health Center for Jefferson County.</td>
</tr>
<tr>
<td>1986</td>
<td>The County Commission appointed the COMTREA Board as the Community Mental Health Fund Board for the county.</td>
</tr>
<tr>
<td>1995</td>
<td>The Keaton Center RCF opened and COMTREA helped establish a crisis program, BHR.</td>
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<tr>
<td>1998</td>
<td>A Safe Place Domestic Abuse Shelter opens at the new location.</td>
</tr>
<tr>
<td>2004</td>
<td>Worked to pass Proposition Healthy Kids, a 1/8th cent sales tax for children’s behavioral health services.</td>
</tr>
<tr>
<td>2008</td>
<td>The Northwest Office on Gravois Rd in High Ridge opened providing easy access of services to those on the Hwy 30 corridor.</td>
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<tr>
<td>2012</td>
<td>COMTREA was designated as a Federally Qualified Health Center and began primary health care service delivery.</td>
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<tr>
<td>2014</td>
<td>Hickory Plaza opened in Hillsboro offering a complete array of FQHC services (behavioral, primary care and dental).</td>
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<tr>
<td>2016</td>
<td>Dr. Huss retired after 44 years of serving as the CEO. Susan M. Curfman became the 2nd CEO of COMTREA.</td>
</tr>
<tr>
<td>2017</td>
<td>Capital Campaign starts to raise $3.1 million to build transitional housing for victims of domestic and intimate partner violence.</td>
</tr>
</tbody>
</table>
Behavioral Health Services delivered to clients and families

FY2017
At a Glance

BEHAVIORAL HEALTH PATIENT VISITS

106,111

1996
ADULT & YOUTH
GENERAL COUNSELING PATIENTS

1360
CSTAR PATIENTS
ALL LEVELS
ADULT & YOUTH

SERVED
INDIVIDUALS

5,620
Adult/Youth

ASSESSED
INDIVIDUALS

1570
for mental health services

721
for substance use services

We Are Committed To Meeting The Needs of our Community

INITIATIVES IN BEHAVIORAL HEALTH

- DISEASE MANAGEMENT (MENTAL HEALTH AND SUBSTANCE)
- OUTREACH/ENGAGEMENT ACCESS TO CARE
- SUPPORTED EMPLOYMENT
- TRAUMA FOCUSED CARE/TREATMENT SERVICES
- WELLNESS COACHING
- ZERO SUICIDE

ZEROSuicide IN HEALTH AND BEHAVIORAL HEALTH CARE

Zero Suicide established an email address and began communicating about this initiative to staff and assessing agency readiness. Zero Suicide does seem to be well embedded in the culture now but we do have much more to do. Here is a list of accomplishments during fiscal year 2016-17:

- Began series of three QPR (Question, Persuade, Refer) trainings
- Created a Zero Suicide Care Client clinical pathway in the new EHR
- Staff Training on CALM and safety planning as well as depression screening at the time of new hire orientation
- All current staff are trained on depression screening, suicide screening, and safety planning
- Each client is screened for depression and suicide at every visit to Comtrea and high risk clients are flagged in the system for identification and intervention
- Organized and offered two Counseling on Access to Lethal Means (CALM) trainings in Festus and Arnold locations

COMTREA utilizes Behavioral Health Response (BHR) for after hours, holiday and weekend coverage for crisis calls and mobile outreaches.
Behavioral Health Services

Transitions from CMHC to CCBHC

Missouri is one of 8 states selected to participate in a federal demonstration pilot to improve access to behavioral health services. COMTREA is 1 of 15 agencies in Missouri to receive designation as a Certified Community Behavioral Health Center.

All CCBHCs must provide or have a Designated Collaborative Organization (DCO) to provide the following core services:

- Crisis mental health services including 24-hour mobile crisis teams, emergency crisis intervention and crisis stabilization*
- Screening/eligibility determination, assessment and diagnosis including risk management
- Patient-centered, comprehensive treatment planning
- Outpatient mental health and substance use counseling services
- Primary care screening and monitoring*
- Targeted case-management/case management/community support
- Psychiatric rehabilitation services
- Peer support, counseling services, and family support services
- Services for members of the armed services and veterans

* We still use BHR, via contract and DCO arrangement, for afterhours, weekend, and holiday coverage.

BEHAVIORAL HEALTH

5.25 FTE
PSYCHIATRISTS AND ADVANCE PRACTICE NURSES

86 CLINICIANS
INCLUDES BACHELOR AND MASTERS LEVEL, LPC, LCSW

1 SUPPORT
FAMILY SUPPORT PROVIDERS

14 CLERICAL
WELCOME CLIENTS AND SUPPORT CLINICIANS
KEATON CENTER
An assisted living facility established in 1995 to provide an enriching treatment environment and home for individuals with severe mental illness. Keaton Center is a 16-bed facility that stays at full capacity.

Keaton Center residents are provided with support to successfully manage the symptoms of their illness, build their independent living skills, and strengthen their community supports. As treatment progresses, most residents will move to an independent living situation. Others will remain with us and move to a skilled level of care as they age.

PSYCHOSOCIAL REHABILITATION (PSR)
Psychosocial Rehabilitation (PSR) provides a welcoming environment where adults with serious mental health and co-occurring disorders can improve social skills, independent living skills, and physical and behavioral health functioning. PSR members participate in community outings, education groups, and skill-building activities. PSR served an average of 20 adult members over fiscal year 2017.

HEALTHCARE HOME
For those clients, both adults and youth, who are experiencing a mental health, substance use and or chronic health care condition, this program provides intensive case management and nursing services to help that individual coordinate the care they need and get them connected to community based providers for continuity of care.

Healthcare Home at a Glance

<table>
<thead>
<tr>
<th>Total Clients Served</th>
<th>Assessments Completed</th>
<th>Metscreen Completed</th>
<th>Female Clients</th>
<th>Male Clients</th>
<th>Adult Clients</th>
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<tbody>
<tr>
<td>422</td>
<td>359</td>
<td>336</td>
<td>266</td>
<td>156</td>
<td>414</td>
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</table>

Working to coordinate the clients physical health care needs in conjunction with their psychiatric conditions.
BEHAVIORAL HEALTH

Clinical Services

Using **EVIDENCE BASED practices for Our Care and Service Delivery**

**Dialectic Behavioral Therapy (DBT)**
Cognitive Behavioral Therapy based intervention that teaches coping techniques and emotional regulation. These client numbers are embedded in our adult counseling numbers.

**Eye Movement Desensitization and Reprocessing (EMDR)**
Eye movement desensitization and reprocessing is a type of psychotherapy used to treat psychological disorders such as post-traumatic stress disorder (PTSD), panic attacks, different types of anxiety, eating disorders, and substance use disorders. This practice started at our agency in 2017 and will be fully implemented in fiscal year 18.

**Moral Recognition Therapy (MRT)**
This is a cognitive behavioral approach utilized with individuals served in the corrections system and involved in Court Treatment programming. In Court Treatment, we provide clinical staffing and service delivery to the treatment team providing intensive outpatient care to those enrolled in Veteran’s Court, Adult Drug Court, Family Drug Court, and DWI Court. Clinical staff are a critical member of those teams, in conjunction and collaboration with law enforcement, probation and parole, children’s division and attorneys and judges for each court.

**Trauma Focused Cognitive Behavioral Therapy (TF-CBT)**
TF-CBT is a short term evidence based practice for children/adolescents that have been impacted by trauma and their caregivers. TF-CBT is appropriate for children ages 3-18. The goal of TF-CBT is to improve traumatic symptoms through short term weekly therapy sessions that last from 8-25 sessions. A PTSD diagnosis is not required for TF-CBT. It also can be used to address other trauma impacts and to provide support to caregivers handling the child’s traumatic experience. The number of children served is embedded in our youth counseling numbers.

Northwest Center for Academics and Counseling (NCAT)
COMTREA and Northwest School District have partnered to develop The Northwest Center for Academics and Therapy (NCAT). This program provides students with needed academics, behavior and therapeutic support in a safe and positive learning environment. Students whose needs extend beyond a traditional education setting attend this self-contained day treatment program. We served **18 students** in this intensive, classroom setting with Northwest School district. In each classroom, along with academic staff, each of the two classrooms had a **full time counselor as well as an intensive case manager** to work with the kids in their homes.

**Parent Child Interaction Therapy (PCIT)**
A short-term, specialized behavior management program for young children experiencing behavioral and/or emotional difficulties. **PCIT** works with the child and caregiver to improve overall behavior and to reduce parenting stress. PCIT is appropriate for children ages 2-6 and some of the goals of PCIT include building the child-parent relationship, improving minding and listening, and building the child’s self-esteem. The number of clients served here are embedded in our youth counseling numbers.

**Supervised Access/Exchange Program (SA/EP)**
This Program (SA/EP) provides supervision services for families requiring supervised visitation, therapeutic supervised visitation, or supervised exchange services. Our goal is to provide a safe, enjoyable experience for your child in a comfortable setting. Supervised Visits are monitored by trained Advocates to ensure the safety and comfort of all parties. Custodial and non-custodial parents are able to utilize separate entrances and an Advocate will escort the child to and from the visitation room. **Therapeutic Supervised Visits** allow families to work with the SAEP Clinician on strengthening the parent/child relationship. Structured developmentally appropriate activities are selected for each visit.
The Show Me Hope team is supported via grants through the Department of Mental Health and the State Emergency Management Agency (SEMA) to provide outreach, support, referrals, and information to those persons displaced or homeless from flooding in 2015 and 2016. This grant continued throughout the full fiscal year and COMTREA served over 493 individuals and families.
The goal of the HCL Inpatient project is to effectively link adults from inpatient psychiatric hospitalization to outpatient care at a Community Mental Health Center (CMHC). Outcomes tracked for the HCL Inpatient program include:

- Show rates to community-based care, to reflect engagement in services
- Admissions to DMH treatment programs (e.g. DMH-funded Community Psychiatric Rehabilitation, Comprehensive Substance Treatment and Rehabilitation, etc.)
- Reduced cost of care and improved overall functioning

COMTREA collaborates with providers in the Eastern Region and the Behavioral Health Network to reduce preventable hospital admissions. The ERE Outreach Team model, a project redesign that began in 2015, has had a significant, positive impact on getting patients connected to community-based care. The Outreach Team has vastly improved consumer engagement rates in the ERE project, from 47% at the start of the program to a striking 90% overall engagement rate.

COMTREA ERE Outreach services had a 92% engagement rate for those clients referred to us. Of those we have engaged, 67% have become clients.

BH Staff intervened in 2,800 calls or walk ins for clients who were seen at one of the four outpatient locations (Festus, Arnold, High Ridge and Hickory Plaza).

Of those referrals and screenings, there was a 77.5% admission rate for those clients into COMTREA services.

Of those we have engaged, 67% have become clients.
Primary Care uses the principles of the Chronic Care Model in the delivery of holistic health care. We provide services at the High Ridge Family Health Center in High Ridge, Hickory Plaza Comprehensive Health Center in Hillsboro and the Valley Middle School in our School Based Health Center in House Springs.

We offer adult and pediatric medical services, preventive care services, well women exams, onsite waive laboratory tests, phlebotomy, immunizations for adults and children along with minor office based procedures utilizing the team approach. In an effort to meet the patient needs we have extended hours at 2 sites along with open access daily for same-day care.

Our goal is to provide integrated high quality health care to the community utilizing the medical assistant, care coordinator, nurse care manager, nursing staff, behavioral health consultant and provider as vital members of the Patient Centered Medical Home team. We will be adding a Community Health Worker to our team to help patients improve their overall health addressing the Social Determinants of Health which include but not limited to socioeconomic conditions.

Quality Healthcare

In your Neighborhood

Patient Services

Adult Care Services
- Chronic Disease Management
- Developmental Screenings
- EKGs
- Health Maintenance
- Immunizations
- In-Office Labs
- Minor Surgical Services
- Physical Exams
- Sexually-Transmitted Infections Testing
- Sick Care
- Smoking Cessation Support
- Well Women Exams & Family Planning

Pediatric Care Services
- Chronic Disease including Asthma
- Developmental Screenings/ Monitoring
- Health Education
- Health Maintenance
- Immunizations
- In-Office Labs
- Lead Screenings
- Sick Care
- Sports/School Physicals
- Well Child Visits / Physical Exams

Community Health Services
- Community Health Worker to provide assistance with referrals and social supports
- Outreach
Increasing Health Screenings
Annual health screenings play a key role in preventative care to ensure patients remain in good health. It has also been shown the successful treatment of depression results in improved chronic disease outcome. In FY 2017 we have experienced improvement in depression screening (PHQ9) with diagnosis and treatment of depression. Depression has a significant effect on all chronic diseases. When a patient is depressed without treatment, it is very difficult for that patient to participate in their care in the patient centered medical home.

Cancer Screenings
Cancer screening has improved with significant improvement in colorectal screening with either the FIT test or screening colonoscopy. We strive to improve health outcomes with early detection and treatment of cancer. Colon Cancer detected early and treated has a significant effect on successful treatment.

In March 2017 the Primary Care Team focused on colorectal cancer screenings.

12% INCREASE IN COLORECTAL CANCER SCREENINGS FROM FY 2016

In FY 2017, out of 1,136 individuals age 50-75 served, 511 or 45% had completed recommended colorectal screenings.
RISKS FROM SMOKING

Smoking can damage every part of the body

Tobacco Use Screenings Increased
In addition we recognize that smoke cessation has a major impact on overall health. Primary care has focused on addressing this determinant of health that can result in improved quality of life and longevity. Smoking cigarettes increases the risk of multiple chronic diseases and cancers.

During FY2017, COMTREA Primary Care has showed an improvement in smoking cessation screening.

Smoking Cessation Results In The Largest Positive Effect On Health Even Over Weight Loss.

Obesity Screenings Increased
Alongside of tobacco use, obesity has a major impact on overall health. Obesity is one of the precursor to chronic diseases such as hypertension, diabetes and multiple cancers. Weight reduction is a major component in the prevention and treatment of certain diseases.

Primary Care showed significant improvement with obesity screenings increasing by 21% from FY2016. 83% of individuals served had screenings or follow up prevention in FY2017.

During FY2017, primary care has taken on the challenges of expanding services and access to services. Patients have acknowledged these changes on each satisfaction survey stating, "multiple, convenient locations and great services, provider listens, easy access, professional, range of service" and many other comments demonstrating that the goal of community health is being received by the persons seeking affordable and quality care.

Providers will continue to educate and treat, knowing that what is invested in health today will be present in the future.

The integration of behavioral health, oral health and primary care services at COMTREA is important as we treat the whole person.

In FY 2017 the total primary care patients seen was 4054 (a 14% increase over FY2016), 2462 being seen by primary care only, 704 were seen by primary care and behavioral health, 559 were seen by primary care and oral health, and 329 were seen by primary care, behavioral health and oral health. The goal in FY2018 is to increase the integration of services at COMTREA.
MAKING GREAT STRIDES IN POPULATION HEALTH

COMTREA has made great strides in the Population Health efforts through the whole team coordination and advancement in IT technology with more robust analytic tools. Tools such as risk stratification, targeted outreach, care plans, performance benchmarking, and planning interventions. These efforts seek to create conditions that promote health and patient engagement, prevent disease and adverse events, and improve health outcomes in a more efficient manner, along with reducing hospitalizations and emergency department visits with a Quadruple Aim of the health care delivery.

"I'M VERY HAPPY WITH THE CARE AND COMMUNICATION WITH THE STAFF."

2017 Patient Survey

One of COMTREA’s Population Health initiatives is with the Primary Care Health Home (PCHH) program, where we worked to target the needs of our most vulnerable individuals served with chronic conditions (i.e. diabetes, hypertension, and obesity). The coordinated team based care efforts include a Registered Nurse, Patient Care Coordinator, Behavior Health Consultant, Clinician, and the individual served.

Primary Care at COMTREA strives to meet the expectations of our community as we provide high quality health care.

- BMI SCREENINGS WITH FU PLAN SAW 21% IMPROVEMENT
- DIABETIC INDIVIDUALS WITH HYPERTENSION CONTROL INCREASED 6%

Primary Care at COMTREA strives to meet the expectations of our community as we provide high quality health care.

For a newly diagnosed 15 year old diabetic patient the PCHH team was able to help this individual overcome multiple barriers, by coordinating specialist appointments, addressing diet and exercise education, along with behavioral counseling to improve school participation. These efforts have helped the patient reach a healthier weight, become more active and improve their diabetic labs levels back to normal.

316 INDIVIDUALS SERVED THROUGH THE PCHH INCENTIVE IN FY2017
A person’s oral health can greatly impact their overall physical health. COMTREA is able to provide adults and children with care for urgent and preventive oral care.

6,698 PATIENTS SEEN over 68,000 dental procedures provided

OUR AVERAGE AGE OF PATIENTS SERVED WAS 29.3 YEARS OLD

<table>
<thead>
<tr>
<th>Age Group</th>
<th>% Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5 yrs</td>
<td>22</td>
</tr>
<tr>
<td>6-18 yrs</td>
<td>31</td>
</tr>
<tr>
<td>19-55 yrs</td>
<td>38</td>
</tr>
<tr>
<td>56-64 yrs</td>
<td>6</td>
</tr>
<tr>
<td>65+ yrs</td>
<td>3</td>
</tr>
</tbody>
</table>

PAYOR MIX FOR CLIENTS

- Medicaid: 63%
- Uninsured: 30%
- Priv. Insurance: 7%

Services Provided

Preventive Services
- Child and Adult Cleanings
- Sealants
- Fluoride Treatments

Periodontal Treatments
- Deep Cleaning
- Periodontal Maintenance

Restorative Services
- Fillings
- Extractions
- Root Canals
DENTAL OUTREACH

We are COMMITTED to IMPROVING the oral health of our community through OUTREACH
Screening Children throughout the area in FY 2017

- DeSoto Schools 407
- Dunklin Schools 269
- Fox Schools 1291
- Hancock Schools 50
- Jefferson RVII Schools 219
- Kirkwood Schools 641
- Ladue Schools 242
- Northwest Schools 1276
- WIC 100
- Windsor Schools 479

An additional 692 children were screened at the Jefferson County Health and Education Back to School Fair

19 OUTREACH EVENTS ATTENDED

IMPROVING ACCESS
At COMTREA we recognize that our patients face unique barriers to care. In order to provide individuals with the best care possible, we are always looking for ways to improve patient access to services.

The mobile dental clinic (MAP) opened with regular visits to Festus and High Ridge. The goal of the MAP clinic is to reach these adult patients that have barriers to dental care in both communities.

Reaching these patients helps to decrease the number of emergency room visits for Jefferson County residents with tooth pain.

564 NEW PATIENTS SEEN
42.14 AVERAGE AGE OF PATIENTS

Over $700,000 IN DENTAL SERVICES DELIVERED
In Fiscal Year 2017, a generous donation allowed us to implement a children's reading program in local elementary schools. The program was named in honor of a retired Jefferson County School Teacher held in high regard by many, Mrs. Marilyn Ellis. Our Reading Teams made 56 visits to schools and libraries.

The Marilyn Ellis Children's Reading Program is designed to serve two purposes: First, the dog acts as an incentive for children in a classroom to read more and increase their interest in and excitement for reading. The dog can also act as a topic for writing exercises. Second, the dog can be partnered with those children needing extra help, whether it is with pace, comprehension or pronunciation. These children and the dog can work separately from the class, offering a non-judgmental atmosphere which helps instill confidence and self-esteem in the children the program serves.

Tails with Tales, the canine therapy program of COMTREA, is dedicated to improving the quality of life for individuals with disabilities and community members at large through placement of specialty trained therapy dogs through partnerships with schools, healthcare facilities and service organizations.

<table>
<thead>
<tr>
<th>canine therapy teams</th>
<th>visits in youth facilities</th>
<th>visits conducted by volunteers</th>
<th>visits in adult facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td>77</td>
<td>177</td>
<td>71</td>
</tr>
</tbody>
</table>

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Volunteers donated 958+ hours (valued at approximately $22,500) of their time to the program, including attending many special events such as:
- Special Olympics
- Veteran’s Fairs
- Senior Expos
- Career Days
- Missouri Kids Unplugged Open House
- Mineral Area College Finals Week De-Stressing Sessions
- COMTREA’s Employee Wellness Fair

COMTREA made many strides in Trauma Informed during the FY2017. Some of the accomplishments include:
- Completed Level I Trauma Aware of MO Plan
- Halfway through Level II Trauma Sensitive at agency level
- Began a TI county initiative Alive & Well Jeff Co with Mercy JC, Health Dept. and Alive & Well Communities
- Steering team developed the infrastructure, short and long term goals and began planning of kick off meeting for fall 2017
- TI 101 Training for all new hires and 3/4 of existing staff
PATIENT ENROLLMENT STORIES

Helping patients with health plan coverage

A woman by the name of Laurie had spent well over a year trying to get insurance with every door being closed. Her father who was her primary care taker had passed and Laurie had nowhere to turn. She scraped and saved to gather her $20.00 copay to come and see a therapist. Although her medical needs required attention, Laurie just did not have the money and would only come when she was very ill. The outlook did not look good for Laurie, mentally or physically.

On one of her medical visits, the Primary Care provider suggested that she see our Navigator to see if she could help with getting her insurance. This was Laurie’s last ditch effort she felt there was no hope and this probably would be a waste of time but since she had nothing better to do she would give it one more shot. We signed her up for Medicaid and it took several months of back and forth, several visits from Laurie having to obtain rides, but she did not give up.

One day while in the office, I get a call from the front desk telling me that Laurie was here to see me. Laurie did not have an appointment, but I came to get see her anyway. She stood there crying and asked if I could read this letter from Social Services that she thinks they denied her but was not for sure. I wrapped my arms around her shoulder and told her that it will be fine, no matter what it says, we would work this together. I opened the letter and began reading and it was the exact opposite of what Laurie thought, she was COMPLETELY covered. When I shared this with her all she could do was cry and hang onto me thanking me. I provided her with the print out from E-MO Med and told her until she receives her card, to use that document should anything happen.

A couple weeks later, Laurie shows up again. She had bought me a beautiful thank you card that was $5.99 with her last $10.00 she had to her name. She told how she had just got out of the hospital. She pleaded for the EMT’s not to put her in the hospital because she could not afford the bill. She told the lady all she had was that paper but no insurance card. Once she got to Mercy, they explained to her that she was covered and was not going to have to pay anything because Medicaid would cover it. Laurie had Bronchial Phenomena and was having difficulty breathing.

She shared while she laid there in the hospital, that she told everyone about her angels. She believes that her Dad sent us to take care of her and make sure that Laurie was going to be okay. She said COMTREA is her family now, and as Daddy always said “It takes a village to raise Laurie Jean”. Laurie has to be the sweetest and kindest little ladies I have ever met. We still see her and she uses all our services.

Angela was a single mother who had just moved to St. Louis and was at a pretty low point in her life. She had not had insurance for years after her divorce and was finally at a point to where she could afford to purchase something on her own. She made an appointment regarding Affordable Care for her and son. She was at just over the qualified amount to purchase insurance for herself so we ran the numbers. I shared with her that we had good news, and more good news. She would be able to get ACA for 35.00 a month that included what the Federal Government would kick in for her to have insurance. However, her child would not qualify for ACA but definitely would qualify for Medicaid.

She sat in my office with her son and broke into tears. She said that I had no idea how it felt to be able to have insurance for herself, but that was not her primary goal. Her goal was to buy for her son. She qualified for a Special Enrollment Period since she had just moved to Missouri so the coverage became effective immediately.

She shared that she had left an abusive relationship and had second thoughts recently about going back because her son needed medical care. She said that this saved her life because she now knows she doesn’t have to go back. Sha can do this on her own.
QUALITY AND ACCREDITATIONS

COMTREA Comprehensive Treatment was recognized by CARF International for excellence of services provided to its community resulting in a three year reaccreditation. Since 2008, COMTREA has been recognized by CARF as an agency of excellence. In the ten years following the first CARF Survey, providers determined that COMTREA would be a “CARF Agency every day.” In 2012 COMTREA expanded its services to include Primary Care and Dental. Through the expansion and integration of services patients have received affordable and quality care. Health is the quality of life in our community. Comprehensive health care is the mission and goal of COMTREA’s services. Providers and patients recognize this daily and take advantage to increase their health through COMTREA Comprehensive Health Care offices and clinics dispersed throughout Jefferson County.

Recognition by the CARF International most recently resulted in the following comments.

“COMTREA is strongly committed to providing quality services that protect and promote the rights, health, and welfare of persons served. The organization is respected in its community and perceived positively by persons served. It has committed itself to the CARF accreditation process and has worked hard to demonstrate conformance to the standards. This commitment is substantiated by the organization’s continued pursuit of quality improvement. COMTREA continues to provide services in a manner that promotes the safety, health, and wellbeing of persons served. The organization’s focus on recovery is evident in the provision of meaningful, individualized services by caring, competent, and committed staff members. The organization is encouraged to dedicate time and energy to developing and revising policies, procedures, and practices in the areas of health and safety, rights of the persons served, program service structure, screening and access to services, person-centered planning, transition, and quality record management. Staff members are committed and resourceful in providing quality services, and persons served are benefiting greatly from the services provided. The organization is aware of the areas for improvement noted and has the commitment and resources to address them.

Community Treatment, Inc. dba COMTREA has earned a Three-Year Accreditation. The organization and its board of directors are commended on this achievement and for their efforts in the pursuit of service excellence. The organization is encouraged to address the recommendations noted in this report and to continue to use the CARF standards to ensure that the services provided are of optimal value to the persons served.”

Quality gives opportunity for health. May our community take advantage of our services in the coming year.
Please join me in creating a community of safe transitional housing that will not only provide safety but the time needed to develop the compliment of skills for independent living.

TOGETHER, we can change the face of domestic and intimate violence in our community.

TOGETHER. we can provide hope for a better future.
A Safe Place Shelter provides emergency shelter for victims and their children, who are victims of domestic/intimate violence, and meets basic emergency residential needs through a community-based facility that provides food, shelter, clothing, and personal care items as necessary, and private sleeping space.

**Mission Statement**

To provide with dignity and respect a comprehensive quality program including education, therapy/counseling, shelter, advocacy services and supports, accessibility, comprehensive referral network, etc. to any domestic violence/intimate partner victim and their children.

*Please note the numbers shown for ASP are by calendar year not fiscal year.*
NATIONAL
- An average of 20 people are physically abused by intimate partners every minute, which is more than 10 million abuse victims annually.
- 1 in 3 women and 1 in 4 men have been physically abused by an intimate partner.
- Intimate partner violence accounts for 15% of all violent crimes.
- 1 in 5 women is raped.
- 1 in 3 female murder victims are killed by intimate partners.
- 72% of all murder-suicides are perpetrated by intimate partners and 94% of murder-suicide victims are female.

MISSOURI
(most recent stats available come from 2012)
- 140,645 incidents of domestic violence were reported.
- 1,505 rapes or attempted rapes.
- 1 in 7 women in MO have been sexually abused.

Jefferson County – 2012 -2017 (As reported to the Sheriff’s Office)*

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Reports</th>
<th>Increase Prior Year</th>
<th>% Increase Prior Year</th>
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<tbody>
<tr>
<td>2017 (Jan-Nov)</td>
<td>1045</td>
<td>71</td>
<td>6.6%</td>
</tr>
<tr>
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<tr>
<td>2012</td>
<td>1031</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Numbers reflect calendar year not fiscal year

On average, a victim of domestic violence will return to the abuser/abusive situation seven times before she is successful in breaking the cycle.

On average, a victim of domestic violence

STATISTICS OF DOMESTIC/INTIMATE VIOLENCE
The following statistics validate the need for additional resources to support victims of intimate/domestic violence, not only for the immediacy of the crisis, but on a more sustained basis with the goal of breaking the cycle. Here are the national statistics and Missouri statistics (source: [http://ncadv.org/learn-more/statistics](http://ncadv.org/learn-more/statistics)) and then for Jefferson County as reported by the Sheriff’s Department.

Additional Resources and Sustained Support to Break the Cycle with inclusion of these four foundational guidelines.
1. Break the cycle of intimate/domestic violence through identification of factors that preclude independent living including, but not limited to, housing, food and nutrition, money management, employment and a support network.
2. A Safe Place will assure that all domestic violence/intimate partner victims and their children receive a comprehensive treatment process in a safe and secure environment for Jefferson County allowing their optimal opportunity to be restored to wholeness.
3. Each client will be taught the necessary skills for sustainable self-independence in order break the cycle of recurrent abuse that triggers the need to return to a safe shelter. Statistics confirm that the average number of stays in a safe shelter is seven per intimate/domestic violence victim.
4. Each client will receive an individualized plan that includes educational needs, job skills assessment, career training, and other essential training initiatives such as financial management, child care, and full medical, dental and mental health services in a coordinated fashion to move allow these victims and their families to become self-sufficient over the course of the individualized plan implementation and goals attainment.

Services and Programs Provided
A completed transitional housing unit will accommodate 4 families escaping domestic abuse and allow them the necessary time (1-2 years) to acquire the skills for independent and sustainable living. Services and programs to be provided include the following.

- Crisis management
- Individual and group therapy
- Money management including budgeting, paying bills and savings account initiation
- Food Management
- Computer literacy
- Life skills training
- Educational skills including high school completion, if needed, and job trainingskills
- Job placement and job maintenance
- Using community resources
- Transportation
- Parenting and child care
- Permanent housing
Domestic Violence

Breaking the Cycle

The success of breaking the cycle of domestic/intimate partner violence with supportive transitional housing is well supported in literature. Martha R. Burt, of the Urban Institute, had these findings to relate, in a report she prepared for the United States Department of Housing and Urban Developments, Office of Policy Development and Research: “Obtaining and retaining permanent housing, acquiring adequate income through employment, benefits or both, increased self-determination, and achieving the maximum self-sufficiency possible” (Burt 2006). Economic independence is a need participants must meet to be successful. A recent study shows that more women are staying in abusive relationships for longer periods of time with increased severity of violence due to their poor economic situation (Wider Opportunities for Women 2012). Economic security cannot be reached overnight.

Transitional housing will give participants the time needed to develop a strong financial plan for their future. In relation to measuring the effectiveness of transitional housing, Burt’s study found that there are four common indicators: where families go after they leave the program, whether families obtained a stable income source, if families remain stable after a significant amount of time and the resources used by families to access permanent housing. Follow up, upon families exiting the transitional housing program determined that 70% went on to establish permanent housing, of which 36% went to conventional housing for which they did not have a rent subsidy, and 22% received a rent subsidy for regular housing in the community. 13% returned to living with family members and only 4% returned to a state of homelessness. Approximately 10% were of unknown destination (Burt 2006).

Outcomes and Milestones to Date

A Safe Place has adequate acreage for the additional housing units. The official ground breaking ceremony was held on March 17, 2017. To date, public water and sewer have been installed and site preparation is complete at the cost of $422,684. This was funded by COMTREA, A Safe Place, and Mary’s House of Hope donors.

We are working to raise funds to build Mary’s House of Hope at A Safe Place, as well as roads, street lights, fire hydrants, and a detention pond. Once the unit with 4 apartments are completed, up to twenty two victims will be able to live independently and receive continued support services. Services offered to women and children include: individual therapy, group therapy, art therapy, child play therapy, life skills training, domestic violence educational groups, court advocacy, transportation assistance, pet protection program, and sexual assault support.

Additionally, women will have continued access to the shelter’s Resource Room for assistance in obtaining additional community resources (i.e. employment assistance, enrollment assistance for healthcare needs, etc.).

According to a research study, published by VAWnet, on best practices relating to transitional housing for victims of domestic violence, “It is clear that many battered women need both short and long-term housing resources if they are going to successfully live independently of abusive partners” (Sullivan, Melbin and Cain 2003). “The greatest strength of transitional supportive housing is that it has the potential to meet the individual needs of women over an extended period of time, maximizing the likelihood of women successfully meeting their own goals. It is the combination of a safe home and supportive services, provided by staff in the context of a respectful and flexible relationship, which results in women feeling they have the ability to get back on their feet. More transitional supportive housing programs are needed, many women mentioned that if the program had not been available they would have been homeless, abused again, in prison for killing their assailants, prostituting, or dead” (Sullivan, Melbin and Cain 2003).

Economic independence is a need participants must meet to be successful.
FIRST ANNUAL FUNDRAISER

“Dog-aritaville” raises over $10,000.00!

Two hundred attendees enjoyed a tropical themed dinner, drinks and auction at Frederick’s Catering in Festus, Missouri on April 29, 2017. Attendees raised over $10,000 in support of the program. The event was put on by the Tails with Tales Fundraising Committee. This Committee was formed to provide a stable fundraising source for the program. The Committee plans and implements each of the Tails with Tales fundraising events.

A SAFE PLACE (ASP)

Mardi Gras Birthday Ball raises over $37,000.00

On February 4, 2017 over 300 guests attended the Mardi Gras Birthday Ball celebrating the 30th year of A Safe Place, the only domestic violence shelter in Jefferson County. It was the largest crowd in the event’s three year history and has become one of the premier fundraising events in the county. Proceeds from the event benefitted A Safe Place and our growth and expansion project, Mary’s House of Hope at A Safe Place transitional housing.
The CAC serves a ten county region including Franklin, Crawford, Gasconade, Osage, Jefferson, St. Francois, Washington, Ste. Genevieve, Madison, and Iron. Since opening in 2000, close to 6000 children have been interviewed at the CAC.

We saw 380 Clients in FY2017.

"Thank you for standing up for our kids and helping the CAC be a voice for the children in your community!"

Pinwheels for Prevention sales is a small fundraiser the CAC does in the month of April to raise awareness during Child Abuse Prevention month. In 2017 we raised $458.70.

We had over 50 individuals volunteering their time that day to make this tournament successful.

Funds raised to benefit the CAC help our staff make a difference in the lives of the children we serve and their families. On average the cost of the services we provide to our children and their families is $1000. We are able to provide forensic interviews, advocacy, and mental health services at no cost to our families. The CAC staff would like to thank each and every person from volunteers to those attending our events to our sponsors and donors.

The Champions for Children 15th Annual Fundraising Dinner and Dance yielded $23,470.59. A little over 300 Champions were in attendance on February 25, 2017.

Marie Pudlowski was named the 2017 Child Advocate of the Year. Marie was one of the Assistant Prosecutors with the Jefferson County Prosecuting Attorney’s Office. She often spent countless hours fighting to give the children and families we serve at the CAC a voice within the criminal justice system.

Pinwheels for Prevention sales is a small fundraiser the CAC does in the month of April to raise awareness during Child Abuse Prevention month. In 2017 we raised $458.70.

Pinwheels remind us all that every child deserves an amazing childhood because they are our future.

The Farmington CAC held their 7th Annual Dinner & Dance, All That Glitters. This rounded out our fundraisers for the fiscal year and raised $12,594. Despite all the rain and flooding, 160 individuals came out to support the CAC and the kids in their community. Det. Tim Porter with the Farmington Police Department and Det. Kenny Wakefield with St. Francois County Sheriff’s Department each received the “Stand for Kids” award.

The 11th Annual CAC Golf Tournament sponsored by Twin City Toyota was held August 19, 2016 at the Union Hills Golf Course in Pevely. Close to 125 golfers enjoyed a beautiful day of golfing on this amazing course. The tournament raised $26,349.22.

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On September 9, 2016, Senator Roy Blunt, who is the chair of the Senate Labor, Health and Human Services, Education, and Related Agencies Subcommittee. During the tour the Senator learned about COMTREA’s emergency room dental voucher program and the program’s school-based prevention services.

Representative Dan Shaul was on-site at COMTREA on Friday, March 17th for a 3 hour scheduled tour of our school-based health care sites at Fox and The Valley. He was highly interested and had positive discussions with administrative staff at The Valley including Principal, Dayle Burgdorf. During the visit he was impressed with the comprehensive school clinic and the multiple benefits. He was seeking to understand the MO billing restrictions by behavioral health professionals for services provided on-site, which do not exist in other states.
Outreach Opportunities

FY 2017 brought many opportunities for COMTREA to reach out to the Community.

Gail Brown, RN and Nurse Care Manager at COMTREA assists monthly with outreach at Faith Community Church’s food pantry.

On the third Saturday of the month from 4 to 7 pm individuals come in to receive food from the pantry, while doing so Gail would offer to take their blood pressure and do a finger stick for blood sugar. Many of the pantry clients already had a primary care provider and initially did not feel the need to talk to Gail.

As months went by and Gail continued to provide this outreach on behalf of COMTREA some of the clients started to let her assess their blood pressure and blood sugar. Slowly, Gail developed a relationship with some of the clients and they sought her out to talk.

Gail would give praise when their numbers were good and provide feedback when the numbers needed work and offering COMTREA’s services when appropriate.

Gail stated that “many of the clients have no one to listen to their fears or concerns” and we have been able to provide that with this outreach.

LOCAL POLICE DEPARTMENTS

Make a friendly wager to collect items for PSR

When Kristy Dale, PSR Manager at COMTREA posted a photo to social media this summer expressing the need for personal care items for clients in need, the De Soto and Pevely Police Departments, as well as the community wasted no time coming together and answering the call for help. Kristy recalls,

“It was one of those 100 degree days, most people consider these items necessities, but for many these items are luxuries.”

De Soto Police Chief Rick Draper saw the post and contacted Kristy. He offered to hold a toiletry drive and recruited Pevely’s interim Police Chief, Tony Moutray.

The two police departments started a drive in July, collecting personal care items for people with mental illness, substance use issues and other life affecting issues. In addition, the held a friendly wager that would require the police chief who collected the fewest personal care items to serve 12 hours of jail time in the other chief’s jail unless they could raise $1,000 for the Muscular Dystrophy Association (MDA). If that chief raised $2,000, the other chief would have to go to jail unless he raised $1,000. Because of Kristy’s initiative, compassionate caring, ability to communicate passionately and effectively, the drive raised over 3,000 personal care items as well as $3,300 for MDA.
Commitment

Throughout the 44 year history, COMTREA Comprehensive Health has grown and evolved to meet the changing needs of the community while remaining stable in an ever-changing, ever-challenging health care industry.

COMTREA’s success can be attributed to the vision and leadership of a dedicated group of individuals that serve on the Board of Directors.

Board of Directors

OFFICERS

Board Chair
Jerry Rogers*
*Insurance Broker
Jerry Rogers Insurance

Board Vice Chair
Kathy Ellis
Psychotherapist
Private Practice

Board Secretary
Elizabeth “Beth” Diveley*
*Talent Acquisition Specialist

Board Co-Treasurer
John Lamping
VP - Relationships
Enterprise Banking

Board Co-Treasurer
Kyle Gowen
Financial Advisor
Wells Fargo Advisors

BOARD MEMBERS

Dayle Burgdorf
Principal, Valley Middle School

Steven Crawford, DO*
Physician, Private Practice

Sylvia Daniels
Office Manager, Retired

Katherine “Kathy” Hardy-Senkel
Judge, Jefferson County Circuit Court

Victoria “Vicky” James
President/CEO, Sunnyhill

Cliff Lane
Self Employed, Lane Consolidated

Martha Maxwell
Library Director, Retired

Mark Mertens*
Financial Advisor, Big Sky Advisors

Audrey Mitchell*
Adjunct Professor

Kelly Steffens*
Dental Office Administrator

Stan Stratton*
Superintendent, Dunklin Schools

Jane Sullivan
Theatre Director, Retired

Alicia Towery
Coalition Coordinator, JCPDC

Ken Waller
County Executive, Jefferson County
PROVIDING QUALITY, COMPREHENSIVE HEALTHCARE THAT IS AFFORDABLE AND ACCESSIBLE

A Safe Place
Undisclosed Location

Annex
222 N Mill Street,
Festus, MO  63028

Arnold
21 Municipal Drive,
Arnold, MO  63010-1012

Bridle Ridge Acres
5 Bridle Ridge Spur
Hillsboro, MO  63050

CAC Farmington
601 Maple Street
Farmington, MO  63640

CAC Festus
106 N Mill Street
Festus, MO  63028
Phone: 636-586-1806

CAC Union
14 S Washington
Union, MO  63084

Central Admissions
110 S Second Street
Festus, MO  63028

Festus Main Location
227 E Main Street
Festus, MO  63028-1952

Fox
849 Jeffco Blvd
Arnold, MO  63010

Hickory Plaza
4 Hickory Ridge Rd- Suite 600
Hillsboro, MO  63050

High Ridge / Emerson
324 Emerson Road
High Ridge, MO  63049

High Ridge Northwest
1817 Gravois Road
High Ridge, MO  63049

Hillsboro Drug Court
351 Main Street
Hillsboro, MO  63050

Keaton Center
120 N Mill Street
Festus, MO  63028

MAP Clinic
Location Varies

Twin City Dental Center
112 S Second Street
Festus, MO  63028

Valley
4300 Gravois
House Springs, MO  63051

Welcome Center 1066
109 N Mill Street
Festus, MO  63028

For more information on locations, please click below and visit our website:

www.comtrea.org

WAYS TO SUPPORT COMTREA
Comprehensive Health Center

As a nonprofit organization, COMTREA relies on the support of our community to remain responsive to emerging community needs. While COMTREA has stable funding through various sources it is not adequate for the total programs delivered. Go to www.comtrea.org today to consider donating.

ANNUAL GIVING
Gifts made annually support the full range of services offered at COMTREA and the funds benefit the programs that need it most.

• Unrestricted Gifts – by check, credit card or securities may be a one time donation or paid in monthly or quarterly installations.

• Restricted Gifts – made to any of the Agency’s programs support the donor’s specific interest may also be paid in installments.

MATCHING GIFTS
Donors can double or even triple donations through their employers. The Human Resources department of many companies provides information about employer matching gift programs.

VOLUNTEERING
Many of our programs benefit from the commitment and contribution of our volunteers, an integral part of the COMTREA team. For more information about current volunteer opportunities, contact marketing@comtrea.org
Our **Sincere Appreciation** to our donors each of you make what we do possible!

We have set some ambitious goals for Fiscal Year 2018. With your support, we will continue to progress and move forward in providing quality healthcare, a wide range of behavioral health programs and community services to Jefferson County and the surrounding areas.

*Without the support of our community, many of the programs and services we provide would not be available to the people who truly need them.*
PROVIDING QUALITY COMPREHENSIVE HEALTHCARE
CLICK ON THE ICONS BELOW
Like and Follow us on face book, twitter and Instagram TODAY!